MARYLAND HEALTH BENEFIT EXCHANGE

Brand Recommendations

May 18, 2012

Branding Objectives

The Maryland Health Benefit Exchange completed an analytic study in the fall of 2011 to identify, segment and prioritize audiences in Maryland for the advertising and public relations campaign.

The following objectives were established for development and refinement of a brand:

- o Establish the Exchange's **role and brand value**

- o Embrace the role of **"educator"** rather than that of "enforcer"

- o Recognize that the exchange will be **completely new** for consumers, requiring **simplification** in brand positioning and communications

- o Brand positioning must be **relevant** to all audience segments

- o Promotion of the brand must **leverage** the power and brand equity of Exchange partners

- o The brand for the Exchange must be a destination for choosing from qualified health plans – emphasizing the **"no wrong door"** policy and open to all

Brand Process and Deliverables

Development Process

o **Brand analysis** across health benefit exchanges in the U.S., based on current practices and planned approaches; review of federal research available for development of FFE

o **One-on-one conversations** with selected health benefit exchange communications directors

o **Online survey** to gather reactions among Maryland adults to a short list of names, in order to identify which name best describes and encourages participation in the consumer portal

Brand Deliverables

o **Recommendation on a short list of brand names and brand rollout strategy**

o **Development of brand name** and logo

o **Development of brand standards**, including use of logo, type styles, color palette and visual style

o **Development of brand templates**, including letterhead/cards/office stationery and PowerPoint template

Research: Quantitative and Qualitative Sources

Study	Audience	Sponsor	Date
Market Analysis and Environment Scan	Maryland and U.S.	MHBE (KRC/ Weber Shandwick)	November 2011
National Focus Groups	Medicaid and Medicare (Cleveland, Dallas, Miami, Houston, New York, Phoenix, Philadelphia)	CMS	January-March 2012
Focus Groups	Medicaid (138% FPL)	Robert Wood Johnson Foundation (Lake Research)	January 2012
Telephone Survey	Medicaid (138% FPL) in MD, AL and MI	Robert Wood Johnson Foundation (Lake Research)	March 2012
Interviews w/ Communications Directors	CA, CO, NY, OR, UT, WV	MHBE (Weber Shandwick)	April 2012
Online Survey	Maryland (up to 400% FPL)	MHBE (HCM Research)	April 2012
Brand Landscape Analysis	Nationwide	MHBE (Weber Shandwick)	April 2012
Search Engine Testing	Online usability testing	Weber Shandwick	May 2012

Executive Summary on Branding

What we learned:	How we learned:
• The terms "exchange" and "connector" test poorly with consumers. Use of the term "marketplace" is preferred. • Use of terms such as "health plans" is better than "healthcare" or "health." • Stand-alone use of terms such as "insurance" or "coverage" imply all types of insurance, not just health coverage. • "Health Plans Maryland" brand rates highest, although low-income population rates "Maryland Health Connection" highest. • With some important exceptions, associations with government or politics tend to be viewed negatively. • Use of MD as abbreviation results in chaotic web search results due to overlap with M.D. • Appealing messages: Quality healthcare, affordable prices, easy comparison shopping, "I'm in control."	• Review of branding status of 15 states that have established exchanges • Interviews with communication leads for exchanges in California, Colorado, New York, Oregon, Utah, West Virginia • MHBE-sponsored research conducted among 250 Marylanders by HCM Research to identify preferred brand names for the Exchange • Review of results of focus groups among low-income Maryland residents conducted by Lake Research Partners and sponsored by RWJF • Interview with CMS officials who discussed results of 50 CMS-sponsored focus groups among income-eligible populations conducted in English and in Spanish, and among small business owners, in locations nationally. • Search engine results testing various names and abbreviations

Names for Consideration

Name	Supporting Points
Health Plans Maryland *HealthPlansMaryland.com*	• Top ranked across populations • Second ranked among Medicaid-eligible • Top ranked as a place to get information on health plans • Clearly connotes health plans vs. general health or other types of insurance products
Maryland Health Marketplace *MarylandHealthMarketplace.com*	• Second ranked across populations • Third ranked in Medicaid-eligible focus groups • Fifth ranked in Medicaid-eligible survey • Among top 3 perceived as private vs. govt., and as a place to get information on health plans
Insure Me Maryland *InsureMeMaryland.org*	• Fourth ranked across populations • Top ranked as affordable • Among top 3 perceived as easy to use, and secure (however not specific about health coverage)
Maryland Health Connection *MarylandHealthConnection.com*	• Top ranked among Medicaid-eligible • Ranked sixth across population • Closely mirrors successful MA Health Connector program • Top ranked as secure, and among top 3 perceived as trustworthy
Get Covered Maryland *GetCoveredMaryland.com*	• Eighth-ranked of 10 names tested, however top-ranked in three key attributes: easy to use, high quality, and trustworthy • Uses active rather than passive voice (however not specific about health coverage)

Next Steps

Stakeholder Presentations:

- o Exchange Implementation Advisory Committee: May 31st

- o GOHR Communications Advisory Committee: June 6

Board Decision: June 12th

Launch URL Microsite

Creative Development: June 18th